

CHAPTER 75-09.1-07.1
OUTPATIENT SERVICES - ADOLESCENT ASAM LEVEL 1

Section

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75-09.1-07.1-01. Definitions. As used in this chapter:

1. "Outpatient services" means an organized nonresidential service or an office practice that provides professionally directed aftercare, individual, and other addiction treatment services to clients according to a predetermined regular schedule of fewer than nine contact hours a week.
2. "Assertive community treatment" means an effective, evidence-based, outreach-oriented, service delivery model that provides comprehensive community substance abuse treatment, rehabilitation, and support services to clients in their homes, work, school, or community setting.

History: Effective October 26, 2004.

General Authority: NDCC 50-06-16, 50-31

Law Implemented: NDCC 50-31

75-09.1-07.1-02. Provider Criteria.

1. An outpatient services program shall offer no more than five hours of programming per week ~~in a structured program.~~

2. An outpatient service program shall offer the program with the length of stay to be determined by a client's condition and functioning.

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75-09.1-07.1-03. Program Criteria. An outpatient services program shall provide skilled treatment services that may include any combination of the following:

1. Individual or group counseling or both, motivational enhancement, brief intervention, cognitive-behavioral therapy, opioid substitution therapy, family therapy, educational groups, occupational and recreational therapy, or other psychotherapy;
2. Case coordination, case management, or assertive community treatment;
3. Services that are provided in an amount, frequency, and intensity appropriate to a client's treatment plan;
4. Issues of psychotropic medication and mental health treatment and their relationship to substance use disorders are addressed as the need arises for patients with mental health problems;

5. Dual diagnosis enhanced programs offer therapies to actively address, monitor and manage psychotropic medication, mental health treatment and the interaction with substance-related disorders.
6. Counseling or assessment of a client regarding the client's abuse of alcohol or a controlled substance must be provided by a licensed addiction counselor as provided in North Dakota Century Code chapter 43-45. The provision of case management and educational services do not need to be performed by licensed addiction counselors. A licensed addiction counselor must be present in all team meetings where level of care and treatment planning decisions are made regarding a client receiving or referred for substance abuse services.

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75-09.1-07.1-04. Admission Criteria. Before an outpatient services program may admit a client, a client must:

1. Meet diagnostic criteria for substance-induced disorders of the DSM; and
2. Meet admission criteria for ASAM level I outpatient services in all six ASAM dimensions and at least one of the following:

- a. Demonstrate the need to take extended time for evaluation or lack motivation to make a commitment to a more intensive recovery effort and requires motivational enhancement strategies;
- b. Have completed a higher intensity level of care but requires continued services until recovery stabilizes;
- c. Have evidence of a brief return to usage not resulting in significant physical or emotional deterioration;
- d. Require outpatient counseling of an intensity that will meet the client's needs without placement in a higher level of care;
- e. Have not been through a prior treatment and exhibits motivation for recovery and meets ASAM criteria for level I in dimensions one, two, three, five and six or the client has low severity of problems in ASAM dimensions one, two, three, five and six;
- f. Have a low severity of problems in ASAM dimensions one, two, three, five and six but is not motivated and requires motivation enhancement strategies best delivered in a level I program; or

- g. Have a severe and persistent mental illness that impairs the client's ability to consistently follow through with mental health appointments and psychotropic medications but does have the ability to access services such as assertive community treatment and case management or supportive living.

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